



STATE OF WASHINGTON

SEASONAL CHANGE APPLICATION

☐ GROUND WATER ☐ SURFACE WATER (OFFICIAL USE)WRIA_____

A NON-REFUNDABLE \$50.00 FILING FEE PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY IN INK)****

1. APPLICANT INFORMATION:

APPLICANT/BUSINESS NAME	PHONE NUMBER ()	FAX NUMBER ()
ADDRESS		
CITY	STATE	ZIP CODE

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NUMBER ()	FAX NUMBER ()
ADDRESS		
CITY	STATE	ZIP CODE

2. WATER RIGHT INFORMATION: (One water right per application)

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
DO YOU HOLD LEGAL TITLE TO THE RIGHT TO BE CHANGED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME:	

3. POINT(S) OF DIVERSION/WITHDRAWAL:

A. EXISTING

SOURCE	#	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #

B. PROPOSED

SOURCE	#	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #

DO YOU OWN THE EXISTING AND/OR PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?
EXISTING ☐ YES ☐ NO PROPOSED ☐ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner for the above point(s) of diversion/withdrawal, please include an attachment.

If you require this document in an alternate format, please contact the Water Resources Program at (360) 407-6600 or TTY (for the speech or hearing impaired) at 711 or 1-800-833-6388.

4. PLACE OF USE:

A. EXISTING

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:						
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	TOTAL # OF IRRIGATED ACRES
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input type="checkbox"/> YES <input type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:						

B. PROPOSED

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PROPOSED TO BE USED:						
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	TOTAL # OF IRRIGATED ACRES
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? <input type="checkbox"/> YES <input type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:						

Attach a detailed map of your proposed seasonal change. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. Also, for irrigation purposes, you must indicate on the map those lands that will not be irrigated within the original place of use.

ARE THERE ANY PENDING APPLICATIONS, WATER RIGHTS OR CLAIMS RELATED TO THE SAME PROPERTY AS THE ONE PROPOSED FOR CHANGE? <input type="checkbox"/> YES <input type="checkbox"/> NO – IF YES, PROVIDE THE NUMBER(S):

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. This may be included in your irrigation plan.

5. REMARKS AND OTHER RELEVANT INFORMATION:

6. SIGNATURES:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

_____ (Applicant)	____/____/____ (Date)
_____ (Water Right Holder)	____/____/____ (Date)
_____ (Land Owner(s) of Existing Place of Use)	____/____/____ (Date)

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